

RECEIPT FROM PTO FOR INDICATED ITEMS

(Do NOT Use for New or Continuing Applications of Any Kind)
Use 2 postcards for all New Applns. (Cont/Div/CIP, too)
Use this sheet when filing CPA

Appln. No: 09/007,498	Attny: W. P. BENGTSSON (SF)
First Inventor: GRUBBS et al.	Date: OCTOBER 20, 1998
	Matter No: 254037 <i>CTCH-1630</i>
	Client No: 20072

ENCLOSED:

<input type="checkbox"/>	Response/Amendment	<input type="checkbox"/>	Cover Sheet	<input type="checkbox"/>	Cited/Linked Documents
<input type="checkbox"/>	Completion Request for R 53(d)/60(d)/62(d)/PCT Nat.				
# <input type="checkbox"/>	No. of Pages Abstract				
# <input type="checkbox"/>	No. of Pages Spec and Claims				
# <input type="checkbox"/>	No. of Numbered Claims <u>Only</u>				
# <input type="checkbox"/>	No. of Sheets of Drawings (Figs <input type="text"/>)				
<input type="checkbox"/>	1 Set Formal	<input type="checkbox"/>	1 Set Informal	<input type="checkbox"/>	Cover Letter
<input type="checkbox"/>	Declaration	<input type="checkbox"/>	# of pages		
<input type="checkbox"/>	Assignment	<input type="checkbox"/>	Cover Sheet		
<input type="checkbox"/>	Small Entity Declaration				
<input type="checkbox"/>	Extension Petition (CDC-111)				
# <input type="checkbox"/>	No. of Priority Documents				
<input type="checkbox"/>	IDS Letter	<input type="checkbox"/>	Citing Appln(s)	<input type="checkbox"/>	Foreign Srch Rpt/OA
<input type="checkbox"/>	PTO-1449	<input type="checkbox"/>	Cited Documents		
<input type="checkbox"/>	Issue Fee Transmittal Form PTOL-85(b) + (c)				
\$	<input type="text" value="-0-"/>	Fee (Check)			

OTHER: POWER OF ATTORNEY FROM ASSIGNEE AND REVOCATION OF PRIOR POWERS

Current DUE DATE:

NONE

(Submit Single Copy Only)